Developing a Compliance Work Plan for Large Medical Groups

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Agenda

• Set the stage
• Goals of work plan
• How to establish a work plan
  — Risk Assessment
  — Sources
• Building the work plan
• Get buy in
One of the Seven Elements

- Auditing and Monitoring
  - Ongoing evaluation process
    - Standards and Procedures
    - Claims submission

Goals of a Work Plan

- Manages Risk
- Supports demonstrating an effective the Compliance Plan
- Budgeting
- Board buy-in and endorsement
- Creates an audit plan and priorities
- Establishes a Calendar

Who Cares About Your Work Plan?

- The Board
- Physicians
- Employees
- Health plans
- Affiliated entities (IPAs, ACOs, etc)
- Hospitals
- Patients
- Your liability insurance carrier
- Regulators (federal and state)
AHLL AND OIG compliance
Guidance for Boards

- Does the compliance program address the significant risks of the organization?
- How were those risks determined and how are new compliance risks identified and incorporated into the program?
- How is the Board kept apprised of significant regulatory and industry developments affecting the organization's risk?
- How is the compliance program structured to address such risks?

So Who Is Involved?

Everyone is! To varying degrees of course.

The Work Plan Development Process

http://www.hcca-info.org/Portals/0/PDFs/Resources/Conference_Handouts/Compliance_Institute/2015/201print2.pdf

Source: Margaret Hambleton April 2015
MANAGING RISKS IS A CONTINUOUS PROCESS

IDENTIFY COMPLIANCE RISKS – WHAT?
- Start with your organization’s strategies and key initiatives
- Draw on your experience
- Consider regulations, policies, procedures
- Evaluate the OIG work plan, audits and enforcement activity
- Consult requirements of other federal and state agencies OCR, OHRP, FDA, OSHA
- Review auditing and monitoring results, prior risk assessments, reports

IDENTIFY COMPLIANCE RISKS – HOW?
- Evaluate how data mining, predictive analytics and cross-jurisdictional intelligence might impact you
- Consult your colleagues
- Benchmark with peers
- Survey employees, key stakeholders, vendors
- Conduct individual interviews
- Convene focus groups and brainstorming sessions
- Convene content groups
Awareness Survey

- Helps address structural elements of your compliance program
- Companion to Effectiveness Evaluation
- Provides helpful information about dissemination of your program to staff

Other Sources of Risks

- The OIG Work Plan is just a starting point – search for your specialty in other federal reports and keep current in your reading
  
  http://oig.hhs.gov/newsroom/whats-new/

- Keep in touch with your specialty societies that follow regulatory changes
- Search your Contractor website and newsletters for updates and changes in your contractor policy
Identify

**Public Data from Private Sources**

ProPublica data – see what public information is available for your practice

[https://projects.propublica.org/docdollars/doctors/pid/90173](https://projects.propublica.org/docdollars/doctors/pid/90173)

http://projects.propublica.org/treatment/

Identify

**Medicare.gov Physician Compare**

[https://www.medicare.gov/physiciancompare/search.html](https://www.medicare.gov/physiciancompare/search.html)
IDENTIFY COMPLIANCE RISKS - ASK

• What is changing?
• What is new?
• What’s gone wrong in the past?
• What can go wrong in the future?
• Where are you most vulnerable?
• Where is the greatest exposure?
• What keeps you up at night?

Examples of Potential Risks

• High volume providers with high levels of coding
• Exclusion checks – missing documentation
• Required training for Medicare Part C/D plans
• Advance Beneficiary Notice (ABN) documentation
• "Incident-to" billing – supervision requirement and appropriate mid-level provider
• Hotline investigation and resolution

Examples of Potential Risks

• High volume of Medicare credit balances (possible false claims liability)
• Unresolved Conflict of Interest issues
• Regulatory issues for non-discrimination notices
• Additional Documentation Requests (ADRs)
• Place of Service Issues (POS)
ASSESS AND PRIORITIZE IDENTIFIED COMPLIANCE RISKS

- Evaluate risks on the likelihood that an adverse event will occur
- Types
  - Experimental
  - Commercial
  - Ranking
- Rank risks - High, Medium, Low
- Rank risks quantitatively – example below

<table>
<thead>
<tr>
<th>Rating</th>
<th>Descriptor</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>Frequent</td>
<td>&gt; 50% chance of occurrence</td>
</tr>
<tr>
<td>2</td>
<td>Possible</td>
<td>&gt; 30% up to 50% chance of occurrence</td>
</tr>
<tr>
<td>1</td>
<td>Unlikely</td>
<td>&lt; 10% chance of occurrence</td>
</tr>
</tbody>
</table>

ASSESS AND PRIORITIZE IDENTIFIED COMPLIANCE RISKS

Quantify the magnitude of the impact on your organization if the event did occur

<table>
<thead>
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<th>Rating</th>
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</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>Major</td>
<td>Potential loss of $10 million</td>
</tr>
<tr>
<td>2</td>
<td>Moderate</td>
<td>Potentially significant loss of $1 million</td>
</tr>
<tr>
<td>1</td>
<td>Minor</td>
<td>Significant loss of $100,000</td>
</tr>
</tbody>
</table>

Incorporating the Risk Assessment

- Risks identified and prioritized
  - High risk is costly to the practice with a high likelihood of occurrence (Impact and vulnerability)
- Controls
  - Policies and procedures
  - Education and training
  - Audits
  - Quality assessment
  - Management approvals
  - Other
RESPOND TO RISKS

- Transfer
- Avoid
- Reduce
- Accept
- Monitor
- Audit

The Audit Plan – A Key Element of the Annual Work Plan

- Internal v. External audits
  - A matter of cost and available resources
  - Advantages and Disadvantages to both
- Ongoing versus Risk
- Audit plans typically show current status
  - Repeat audits may show trends and reflect efforts of corrective action plans
- Audit design is critical
  - What do you really want to know? Will the results be actionable and reflect the degree of risk?
Audits: Internal vs External

- Compliance plans typically mandate audits to test compliance
- Most often the quantity and quality of audits depends on resources
- Audit planning starts with budget planning
- Largest practices may have internal audit teams but many practices will need some audit support from external sources
- Good articles on Internal vs External https://www.linkedin.com/pulse/8-differences-between-internal-external-‐audit-‐david-‐lewis/


Building the Work Plan

- Not the same as the compliance plan
- The work plan implements elements of the compliance plan
- Ability to track back to the compliance plan for authority and relevance
- The work plan should be reviewed and approved by the compliance committee

Work Plan Elements

Definable goal
By 12/31/18 all providers will meet 90% billing accuracy goals based on CMS Guidelines
- S = Specific
- M = Measurable
- A = Attainable
- R = Relevant
- T = Time-Based
- Milestones/Scheduling
- Resources
- Tracking
Other examples
• All senior management and physician leaders will complete COI surveys including reviews
• All policies and procedures will be reviewed no less than annually
• Physician recruitment agreements will be reviewed and approved by senior management prior to implementation
• All employees and physicians shall complete CMS required training prior to year end

Other examples
• All employees and contractors will have monthly verification against exclusion lists per Medicare Part C sponsor agreements
• Perform audit of I-9 forms by mid-year
• Perform audit of ABN forms on file by end of Q1
• Verify current status of all off-shore vendors annually

Awareness Survey
*Keep it Short and Simple*
• Consider multiple deployment methods
• Typical areas of inquiry
  – Do employees know who the Compliance Officer and Compliance Staff are?
  – Do employees know how to find the Standards of Conduct and Compliance Policies?
  – Do employees know how to report Compliance concerns?
  – Do employees trust that if they report a concern it will be addressed?
  – Do employees think their co-workers, supervisor, and organization leaders act with integrity
Effectiveness
What do you measure?
• Eight elements
  1. Authority
  2. Policy and Procedures (including Standards of Conduct)
  3. Training and Education
  4. Reporting
  5. Auditing and Monitoring
  6. Response and Prevention
  7. Enforcement
  8. Risk Assessment and Work Plan Development

Gap Analysis

Stakeholder Engagement
• Include key stakeholders in Effectiveness Evaluation and Risk Assessment process
• Alignment with operational priorities and strategy
• Consider burden and benefit
• Use your experts
• Communicate Plan and Progress
  – Governing Body
  – Executive Leaders
  – Compliance Committees
  – Departments helping you or doing the work
Questions?

Thank you!

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